Missouri
Department
of Transportation



105 West Capitol Avenue P.O. Box 270 Jefferson City, MO 65102 (573) 751-2551 Fax (573) 751-6555 www.modot.org

Pete K. Rahn, Director



2007 Missouri Quality Award Winner

ADDENDUM 001 Request For Quotation Communication Seminar RFQ 4-080820

Offerors should acknowledge receipt of Addendum 001 (ONE) by signing and including it with the original quote. The due date for receipt of quote remains the same. **Please use the revised quote form attached to this Addendum.** All other terms and conditions remain unchanged and in full force.

Name and Title of Signer	Name and Title of Department Authority				
(Print or type)	Leann Kottwitz				
	Senior General Services Specialist				
·					
Contractor/Offeror Signature	Department of Transportation				
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
	Calana a Jottili h				
(Signature of person authorized to sign)	(Authorizing Signaturé)				
Date Signed:	Date Signed:08/15/08				



MISSOURI DEPARTMENT OF TRANSPORTATION INFORMAL QUOTE GUIDELINES AND DOCUMENTATION FOR PURCHASES \$3,000 TO \$24,999.99 THIS IS NOT AN ORDER

REQUEST FOR INFORMAL QUOTATION

Please quote the lowest prices covering material specified and provide all information requested.

TODAY'S DATE:		08/15/08	QUOTE DUE BY:	08/20/08 10:00 AM	F.O.B. REQUIREMENTS:		DESTINATION		
TIME REQUIRED FOR DELIVERY:		November 4, 2008	QUOTATION NO:	4-080820	BUYER NAME /TELEPHONE NUMBER:		LEANN KOTTWITZ 573-751-3685		
TO BE DELIVERED NO LATER THAN		November 4, 2008	QUOTATION NO.						
District Mailing Address/Facsimile #:		573-526-1218		Delivery Locations:	Missouri Department Of Transportation 1320 Creek Trail Drive Jefferson City, Missouri 65109			tion	
		(1)	DESCRIPTIO	NI		UNIT	UNIT PRICE	DELIVERY	
Quanti	ty U/M	(incli	(including size and/or part #'s)			PRICE	EXTENSION	TIME	
1	LUMP SUM	Prices must in	rices must include all cost associated with nis one-day seminar. Maximum 50 attendees					11/04/08	
		Please See A Services	ttachment A fo	r Scope Of	,				
		TOTA	L ORDER EX	TENSION	11.0			,	
If checked, the following item is a provision of this quotation.									
☐ If M	If this quotation is accepted, the quoting firm will be required to comply with the prevailing wages as fixed by the Missouri Department of Labor and Industrial Relations for each affected craft and type of workmen. The current General Wage Order may be inspected at any District Headquarters Office or at the Headquarters Office in Jefferson City.								
Company Name:									

All responses to this Request for an Informal Quotation MUST be submitted on this form and all pages MUST be returned to the Buyer listed above at the District mailing address shown. See attached for conditions and instructions.											
	VEND	OR NOTES									
	·										
VENDOR INFORMATION											
		Vendor Co	Vendor Contact Information (including area codes):								
Vendor Name		Phone #:	- George State - 1 William								
/Mailing Address		Fax#									
·		Cellular#									
Printed Name and Title of Responsible Officer or Employee:		Signature:									
	red/certified with the State of Missouri a	as a (please circle):									
Is your firm MBE Certified? Yes □ No □ Is your firm WBE Certified? Yes □ No □ Would your company like information on becoming a registered/certified MBE/WBE vendor? Yes □ No □											
List all agencies your f	irm is currently certified with?										